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RICHARD H. WIEKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

RUBEN LOPEZ

Plaintiff,

vs.

EDMUND G. BROWN, JR.

Defendant.

CASE NO. _____

PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS

RMW

(PR)

I, RUBEN LOPEZ, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ___ No ☒

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: _____ Net: _____

Employer: _____

1 If the answer is "no," state the date of last employment and the amount of the gross and net
 2 salary and wages per month which you received. (If you are imprisoned, specify the last
 3 place of employment prior to imprisonment.)

4 _____
 5 _____
 6 _____

7 2. Have you received, within the past twelve (12) months, any money from any of the
 8 following sources:

9 a. Business, Profession or Yes ___ No ☒
 10 self employment

11 b. Income from stocks, bonds, Yes ___ No ☒
 12 or royalties?

13 c. Rent payments? Yes ___ No ☒

14 d. Pensions, annuities, or Yes ___ No ☒
 15 life insurance payments?

16 e. Federal or State welfare payments, Yes ___ No ☒
 17 Social Security or other govern-
 18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount
 20 received from each.

21 _____
 22 _____

23 3. Are you married? Yes ___ No ☒

24 Spouse's Full Name: _____

25 Spouse's Place of Employment: _____

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ _____ Net \$ _____

28 4. a. List amount you contribute to your spouse's support: \$ _____

1 b. List the persons other than your spouse who are dependent upon you for
 2 support and indicate how much you contribute toward their support. (NOTE:
 3 For minor children, list only their initials and ages. DO NOT INCLUDE
 4 THEIR NAMES.).
 5 _____
 6 _____

7 5. Do you own or are you buying a home? Yes ___ No ☒

8 Estimated Market Value: \$ _____ Amount of Mortgage: \$ _____

9 6. Do you own an automobile? Yes ___ No ☒

10 Make _____ Year _____ Model _____

11 Is it financed? Yes ___ No ___ If so, Total due: \$ _____

12 Monthly Payment: \$ _____

13 7. Do you have a bank account? Yes ___ No ☒ (Do not include account numbers.)

14 Name(s) and address(es) of bank: _____
 15 _____

16 Present balance(s): \$ _____

17 Do you own any cash? Yes ___ No ___ Amount: \$ _____

18 Do you have any other assets? (If "yes," provide a description of each asset and its estimated
 19 market value.) Yes ___ No ___
 20 _____

21 8. What are your monthly expenses?

22 Rent: \$ _____ Utilities: _____

23 Food: \$ _____ Clothing: _____

24 Charge Accounts: _____

25 Name of Account Monthly Payment Total Owed on This Acct.

26 _____ \$ _____ \$ _____

27 _____ \$ _____ \$ _____

28 _____ \$ _____ \$ _____

1 9. Do you have any other debts? (List current obligations, indicating amounts and to
2 whom they are payable. Do not include account numbers.)

3 NO

4
5 10. Does the complaint which you are seeking to file raise claims that have been presented
6 in other lawsuits? Yes ___ No ✓

7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in
8 which they were filed.

9
10
11 I consent to prison officials withdrawing from my trust account and paying to the court
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and
14 understand that a false statement herein may result in the dismissal of my claims.

15
16 5/19/08

17 DATE

18 *Rubin Lopez*

19 SIGNATURE OF APPLICANT
20
21
22
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24
25
26
27
28

Case Number: CV-08-2489 RMW(PR)

CERTIFICATE OF FUNDS
IN
PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of RUBEN LOPEZ for the last six months
MULECREEK STATE PRISON ^[prisoner name] where (s)he is confined.
_[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 13.13 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 23.03.

Dated: 5/22/08

L. L. Lugo Asst. Clerk II
[Authorized officer of the institution]

REPORT ID: TS3030 701

CALIFORNIA DEPARTMENT OF CORRECTIONS
MULE CREEK STATE PRISON
INMATE TRUST ACCOUNTING SYSTEM
INMATE TRUST ACCOUNT STATEMENT

REPORT DATE: 05/23/08
PAGE NO:

FOR THE PERIOD: DEC. 01, 2007 THRU MAY 23, 2008

ACCOUNT NUMBER : T72201
ACCOUNT NAME : LOPEZ, RUBEN
PRIVILEGE GROUP: A

BED/CELL NUMBER: B 06000000000114L
ACCOUNT TYPE: I

TRUST ACCOUNT ACTIVITY

TRAN	DATE	CODE	DESCRIPTION	COMMENT	CHECK NUM	DEPOSITS	WITHDRAWALS	BALANCE
	12/01/2007		BEGINNING BALANCE					59.45
	12/04*DD30		CASH DEPOSIT	MLLST 2034		9.00	68.00	68.45
	12/10 FC02		DRAW-FAC 2	B/1ST 2162			68.00	0.45
	12/27*DD31		CHECK DEPOSIT	MLLST 2349		45.00		45.45
			ACTIVITY FOR 2008					
	01/08 FR01		CANTEEN RETUR	702462			0.10-	45.55
	02/08 FC02		DRAW-FAC 2	B/1ST 2900			45.00	0.55
	04/09*DD31		CHECK DEPOSIT	MLLST 3665		11.25		11.80
	05/01 W536		COPAY CHARGE	COPAY 4002			5.00	6.80
	05/06*DD30		CASH DEPOSIT	MLLST 4054		11.25		18.05
	05/06*DD30		CASH DEPOSIT	MLLST 4054		2.25		20.30
	05/07 FC02		DRAW-FAC 2	B/1ST 4103			20.00	0.30

CURRENT HOLDS IN EFFECT

DATE	PLACED	HOLD CODE	DESCRIPTION	COMMENT	HOLD AMOUNT
05/21/2008		H114	COPAY FEE, MED.	COPAY 4318	5.00

* RESTITUTION ACCOUNT ACTIVITY

DATE SENTENCED: 12/23/05
COUNTY CODE: *SCL

CASE NUMBER: *CC578232
FINE AMOUNT: \$ 455.00

DATE	TRANS.	DESCRIPTION	TRANS. AMT.	BALANCE
12/01/2007		BEGINNING BALANCE		382.50
12/04/07	DR30	REST DED-CASH DEPOSIT	10.00-	372.50
12/2/07	DR31	REST DED-CHECK DEPOSIT	50.00-	322.50



THE ATTORNEY
GENERAL
OFFICE
BY
ATTORNEY
GENERAL
OFFICE

REPORT ID: 153030 .701

MULE CREEK STATE PRISON
INMATE TRUST ACCOUNT STATEMENT

REPORT DATE: 05/23/08
PAGE NO: 2

FOR THE PERIOD: DEC. 01, 2007 THRU MAY 23, 2008

ACCT: T72201

ACCT NAME: LOPEZ, RUBEN

ACCT TYPE: I

* RESTITUTION ACCOUNT ACTIVITY

DATE SENTENCED: 12/23/05
COUNTY CODE: *SCL

CASE NUMBER: *CC578232
FINE AMOUNT: \$ 455.00

DATE	TRANS.	DESCRIPTION	TRANS. AMT.	BALANCE
04/09/08	DR31	REST DED-CHECK DEPOSIT	12.50-	310.00
05/06/08	DR30	REST DED-CASH DEPOSIT	12.50-	297.50
05/06/08	DR30	REST DED-CASH DEPOSIT	2.50-	295.00

* THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT *
* IS EQUAL TO TEN PERCENT OF THE RESTITUTION AMOUNT COLLECTED. *

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
59.45	78.75	137.90	0.30	5.00	0.00

CURRENT
AVAILABLE
BALANCE

4.70-



THE WITHIN II
COPY OF THE
BY THIS OFFER
ATTEST:
CALIFORNIA
BY [Signature]
Trust

RUBEN LOPEZ # T-72201
MCSP 86-1142
PO BOX 409040
TONE, CA. 95640

2

BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 12615 WASHINGTON DC

POSTAGE WILL BE PAID BY UNITED STATES COURTS

US DISTRICT COURT
450 GOLDEN GATE AVE
PO BOX 36060
SAN FRANCISCO CA 94102-9680



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

